

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000101668

**Entity Name:** TARASERVICE INTEGRAL SOLUTIONS LLC

**Current Principal Place of Business:**

649 SW 9 STREET APT 210  
MIAMI, FL 33130

**Current Mailing Address:**

649 SW 9 STREET APT 210  
MIAMI, FL 33130 US

**FEI Number:** 30-1300595

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

TAX UNION LLC  
2800 GLADES CIRCLE SUITE 105  
WESTON, FL 33327 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name SITTNER, HEINO  
Address 649 SW 9 STREET APT 210  
City-State-Zip: MIAMI FL 33130

Title AMBR  
Name ECHEVARRIA, VIRGINIA  
Address 649 SW 9TH ST., APT. 210  
City-State-Zip: MIAMI FL 33130

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SITTNER , HEINO

AMBR

01/13/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date